FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Co	rporation		L7827 GIES INTERNAT		(8)							
Principal Place of Business					Mailing Address							anı diğil Şiğil (Abı
1300 S ANDREWS AVE POMPANO BEACH FL 33069			1300 S ANDREWS AVE POMPANO BEACH FL 33089						DO NOT WRITE IN THIS	PDACE		
									-	3. Date Incorporated or Qualified	SPAUL	<u></u>
2. Principal Place of Business					To Advisor Address					06/06/1990 4. FEI Number		T
21				28. 26	2a. Mailing Address					4, FET Number 65-0240276	-	Applied For Not Applicable
	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		5 Additional
22	City & State			27	City & State							Required
23	nly a state			28					Election Campaign Financing Trust Fund Contribution		DO May Be led to Fees	
Zip)		Country		Zip	Cour	ntry			8. This corporation owes or has paid the cu	neat year	Intangible
24		o Name an	d Address of Curre	29	ared Aneni	30			بلـ	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes	□ No
 -	GR	EENE, MICH					81	Name			<u></u>	
	21	O UNIVERSI					82	Street Add	dress	M . ZAKRYK s (P.O. Box Number is Not Acceptable)		
SUITE 707							B3	596	<u>51</u> _	\$.W. 19th St.		
CORAL SPRINGS FL 33071						Plau Plau			ant	tation, FL 33317	·	
							84	City		FL	85 Z	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this state office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I agent. I am familiar with accept the obligations of Section 607.0505, Florida Statutes.										ation submits this statement for the purpose of submits this statement for the purpose of submits the submits and	of changin	g its registered as registered
		familiar with	and accept the oblic	nations of	Section 607.0505, FI	orida Statu	utes			4-20-	97	Ü
SIGNA	ATURE _	la alure, typed or p	suited tame of register of a			If Registered	Ager	nt signature requ	u red w	when reinstaling) DATE	_ 0	
12.			OFFICERS AN	ND DIREC	TORS DELETE	13.				ADDITIONS/CHANGES TO OFFICERS AN		
TITLE		d Zakryk,	JOHN		D pereit	1.1 TIT 1.2 NAI					L Chang	åc 🗔 vanitioti
STREET A	address		ANDREWS AVE					ADDRESS				
CITY-ST	-ZIP	POMPAN	IO BEACH FL			1.4 CtT	Y-ST	- Z IP				
TITLE					L_ DELETE	2.1 TIT					L Chang	ge Addition
NAME STREET A	ABDAFSS					22 NA		ADDRESS				
CITY-ST						2.4 CI				•		
TITLE					DELETE	3.1 111	LE				Chan	ge Addition
NAME						3.2 NA		ADDRESS				
STREET A						3.4. CI		ADDRESS T- 21P				
TITLE					☐ DELETE	4.1 1171					Chang	ge Addition
NAME						4. 2 NA						
STREET A	1							ADDRESS				
CITY-ST-	-2117				DEVETE	4.4 CIT		- ZIF*			Chang	ge Addition
NAME						5.2 NA						
STREET A		1						ADDRESS				
CITY-ST	-ZIP				DELETE	5.4 CIT 6.1 TIT		- ZIP		7	Chang	ge Addition
NAME					- Decem	6.2 NAI					U. Oridin	P. CORROLL
STREET A	ADDRESS							ADDRESS				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CICNIATUDE.

and the same

1-30-90

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FILED

May 08 1998 8:00am

Secretary of State